

NOTICE OF PATIENT RIGHTS AND RESPONSIBILITIES

PURSUANT TO 42 CFR §418.52
PATIENT AND FAMILY GUIDELINES — RIGHTS AND RESPONSIBILITIES

The patient/family has the right to:

- To exercise his/her rights as a patient of the hospice without discrimination on the basis of race, religion, age, gender, national origin, sexual orientation, marital status, disability, veteran status, diagnosis, cost of therapy, ability to pay, or life circumstances.
- Be involved in developing his/her hospice plan of care.
- Make informed decisions regarding care or services.
- Accept or refuse care or treatment and be informed of potential results and/or risks.
- Formulate, at the individual's option, advance directives.
- Have complaints heard and reviewed.
- Confidentiality in accordance with state and federal regulations.
- Have his/her property and person treated with respect.
- Receive effective pain management and symptom control for conditions related to the hospice diagnosis.
- Choose his/her attending physician.
- Be free from mistreatment, neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown source.
- Receive information about the services covered under the hospice benefit.
- Receive information about the scope of services that the hospice will provide and specific limitations on those services.

The patient/family assumes the responsibility for:

- Providing daily physical and emotional support.
- Performing all agreed upon procedures of care according to stated guidelines.
- Following the prescribed procedures for contacting Community Hospice & Palliative Care for assistance.
- Contacting Community Hospice & Palliative Care when admission to a hospital is pending.
- Informing Community Hospice & Palliative Care when unavailable for visits.
- Participating in and complying with the hospice plan of care.
- Helping your hospice care team assess your pain and working with them to develop an effective pain management and symptom control plan.
- Informing your hospice care team about any concerns, complaints or questions regarding needs and/or services being provided by Community Hospice & Palliative Care.

To report a complaint regarding your patient rights or the services you receive, please call Community Hospice & Palliative Care 904-407-7097 or Agency for Health Care Administration 1-866-966-7226.

To report abuse, neglect, or exploitation, please call Community Hospice & Palliative Care 904-407-7097 or Agency for Health Care Administration 1-866-966-7226.

NOTICE OF PATIENT RIGHTS AND RESPONSIBILITIES

<p style="text-align: center;">PURSUANT TO FS 381.026</p> <p style="text-align: center;">SUMMARY OF THE FLORIDA PATIENT'S BILL OF RIGHTS AND RESPONSIBILITIES</p>

Florida law/FS 381.026 requires that health care provider or health care facility recognize your rights while you are receiving medical care and that you respect the health care provider's or health care facility's right to expect certain behavior on the part of patients. You may request a copy of the full text of this law from your health care provider or health care facility. A summary of your rights and responsibilities follows:

RIGHTS:

A patient has the right to be treated with courtesy and respect, with appreciation of his/her individual dignity, and with protection of his/her need for privacy.

A patient has the right to a prompt and reasonable response to questions and requests.

A patient has the right to know who is providing medical services and who is responsible for his/her care.

A patient has the right to know what patient support services are available, including whether an interpreter is available if he or she does not speak English.

A patient has the right to bring any person of his/her choosing while the patient is receiving treatment or is consulting with his/her health care provider, unless doing so would risk the safety or health of the patient, other patients, or staff of the facility or cannot be reasonably accommodated by the facility.

A patient has the right to know what rules and regulations apply to his or her conduct.

A patient has the right to be given by the health care provider information concerning diagnosis, planned course of treatment, alternatives, risks, and prognosis.

A patient has the right to refuse any treatment, except as otherwise provided by law.

A patient has the right to be given, upon request, full information and necessary counseling on the availability of known financial resources for his or her care.

A patient who is eligible for Medicare has the right to know, upon request and in advance of treatment, whether the health care provider or health care facility accepts the Medicare assignment rate.

A patient has the right to receive, upon request, prior to treatment, a reasonable estimate of charges for medical care.

A patient has the right to receive a copy of a reasonably clear and understandable, itemized bill and, upon request, to have the charges explained.

A patient has the right to impartial access to medical treatment or accommodations, regardless of race, national origin, religion, handicap, or source of payment.

A patient has the right to treatment for any emergency medical condition that will deteriorate from failure to provide treatment.

A patient has the right to know if medical treatment is for purposes of experimental research and to give his or her consent or refusal to participate in such experimental research.

A patient has the right to express grievances regarding any violation of his or her rights, as stated in Florida law, through the grievance procedure of the health care provider or health care facility which served him or her and to the appropriate state licensing agency.

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RESPONSIBILITIES:

A patient is responsible for providing to the health care provider, to the best of his or her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to his or her health.

A patient is responsible for reporting unexpected changes in his or her condition to the health care provider.

A patient is responsible for reporting to the health care provider whether he or she comprehends a contemplated course of action and what is expected of him or her.

A patient is responsible for following the treatment plan recommended by the health care provider.

A patient is responsible for keeping appointments and, when he or she is unable to do so for any reason, for notifying the health care provider or health care facility.

A patient is responsible for his or her actions if he or she refuses treatment or does not follow the health care provider's instructions.

A patient is responsible for assuring that the financial obligations of his or her health care are fulfilled as promptly as possible.

A patient is responsible for following health care facility rules and regulations affecting patient care and conduct.

If you currently have Medicaid or become Medicaid eligible you have a responsibility to report suspected Medicaid fraud, please call toll free 1-866-966-7226.

Medicaid Fraud means an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to him or herself or some other person. It includes any act that constitutes fraud under applicable federal or state law as it relates to Medicaid. The Office of the Inspector General at the Agency for Health Care Administration accepts complaints regarding suspected fraud and abuse in the Florida Medicaid system by phone at 1-866-966-7226 or on the Agency web site at http://ahca.myflorida.com/Executive/Inspector_General/medicaid.shtml.